FORM PTO-447A   Staple to face of Application   U.S. DEPARTMENT OF COMMERCE
(Rev. 9-00)   PATENT & TRADEMARK OFFICE

APPLICATION TRANSFER REQUEST FOR S.N. 0 9,718,870

Section I. TRANSFER REQUEST BY (PRINT NAME)   A. Awad   Date   June 12, 2001

TO: Art Unit   2173   Class/sub   345/700+   From: A.U.   2673   Class   345

REASON:
GUI

Gatekeeper concurrence   *RAD* for JS   Hand carried: Personally accepted by

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Section II. DISPOSITION BY RECEIVING TC   A.U. 2173   Date 7/17/01

          ☒ ACCEPTED BY RECEIVING T.C.

          ☐   NOT ACCEPTED   ☐ Forward to Post Classifier
                              ☐ Return to Originating Technology Center /AU_____
REASON:

          DISPOSITION BY RECEIVING TC POST CLASSIFIER

☐ This dispute was resolved. Forward to Class/Sub_____   TC/AU_____   Post Classifier_____ Date_____

                                                       Concurring_____ Date_____
☐   This dispute was not resolved, forward to DISPUTE RESOLUTION PANEL
Post Classifier Assessment:

Section III. DISPOSITION BY DISPUTE RESOLUTION PANEL   Date _____

Panel Decision: Forward to Technology Center / Art Unit _____   Class/sub _____

REASON:

Panel Member _____☐ Concurring Panel Member _____

☐   This application MAY be returned to the dispute resolution panel if reconsideration is desired (use form 447R).

☐ This application MAY NOT be returned to the dispute resolution panel. THIS IS A FINAL DISPOSITION.

2600 INTERNAL TRANSFER REQUEST FOR S.N.   09/ 7/8, 870

| DATE: 06 / 12 /01 | FROM: A. Awad (print name) |

FORWARD TO:

A. Art Unit: 26.

B. Class: _____

C Subclass: _____

REASON(S):

A. You had Parent   ☐ (check box)

B. See Title   ☐ (check box)

C. See Abstract   ☐ (check box)

D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED:

GUI

| DATE: _____ | FROM: _____ (print name) |

FORWARD TO:

A. Art Unit: _____

B. Class: _____

C Subclass: _____

REASON(S):

A. You had Parent   ☐ (check box)

B. See Title   ☐ (check box)

C. See Abstract   ☐ (check box)

D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED:

| DATE: _____ | FROM: _____ (print name) |

FORWARD TO CLASSIFIER

REASON(S):

A. You had Parent   ☐ (check box)

B. See Title   ☐ (check box)

C. See Abstract   ☐ (check box)

D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

| DATE: _____ | CLASSIFIER: _____ |

FORWARD TO:

A. Art Unit: _____

B. Class: _____

C Subclass: _____

REASON(S):

A. You had Parent   ☐ (check box)

B. See Title   ☐ (check box)

C. See Abstract   ☐ (check box)

D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED: